EQUUS

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FIVE-YEAR INDEX & REFERENCE GUIDE

November 1977 to November 1982

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EQUUS 1-60 EDITORIAL INDEX

This cumulative index is designed as a practical reference to the material that has appeared in EQUUS since the magazine's inception. With an emphasis on health-care topics, the subjects are listed alphabetically. Their corresponding issue numbers (in bold print) and page numbers follow.

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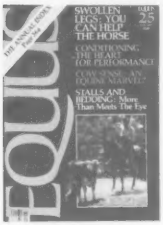
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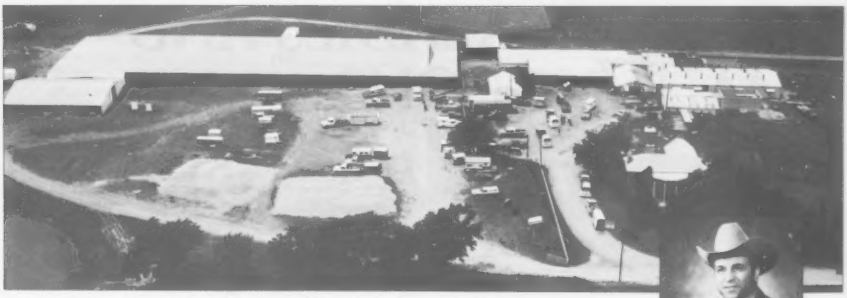

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A GLOSSARY OF SELECTED EQUINE MALADIES AND MALFUNCTIONS

Disease and dysfunction names tend to twist the tongue and sound alien. But if you can sort your way through the -emia's and -itis', you'll find that you can learn a lot about your horse, in both health and disease. Consider it a worthy challenge.

Addison's disease—degenerative condition caused by deficient secretion of hormones from the cortex of the adrenal gland.

alkali disease (bobtail disease)—condition resulting from an excess of selenium in the diet. Causes hairs in the mane and tail to fall out.

anemia—shortage of red blood cells, commonly caused by excessive bleeding, infection, dietary deficiency or presence of toxins in the body.

anhidrosis (an-hi-DRO-sis)—failure of the body's sweat mechanisms.

azoturia (ay-zo-TOO-ree-ah) ("Monday morning sickness")—severe, painful cramping of large muscle masses, resulting in discoloration of urine with the by-products of muscle destruction. Commonly triggered in fit horses who resume heavy exercise after a few days of rest without any reduction in grain ration; severe form of "tying-up."

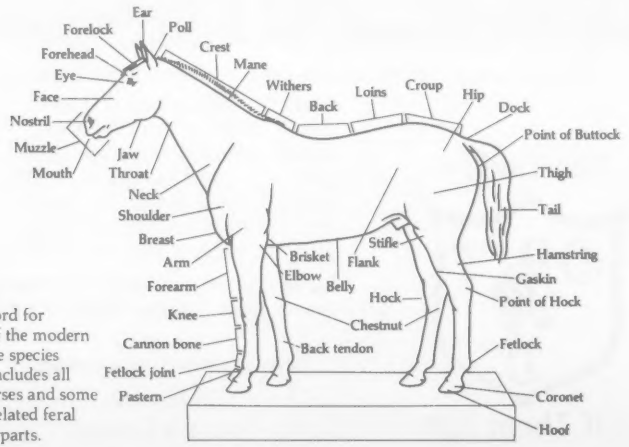
"big head" disease (bran disease, miller's disease)—degenerative condition causing enlargement of the head bones. Results from too much phosphorus or too little calcium in the diet.

brucellosis (brew-se-LOW-sis)—infection with *Brucella* bacteria. In horses it may produce poll evil and fistula, both abscessing infections of the ligament stretching from poll to withers.

combined immunodeficiency (CID)—a fatal genetic condition in horses, so far identified only in Arabian foals. Affected foals are unable to produce antibodies and become defenseless to fight off infection.

conjunctivitis (kon-JUNK-tih-VY-tis)—inflammation of the conjunctiva, the membrane lining the inside of the eyelid and covering the exposed surface ("white") of the eyeball.

contagious equine metritis (CEM)—bacterial infection of the uterus, recently recognized in horses.



Equus—Latin word for "horse"; genus of the modern horse family. The species *Equus caballus* includes all domesticated horses and some of their closely related feral and wild counterparts.

cryptorchid (krip-TOR-kid)—male horse with one or both testicles abnormally retracted into the abdomen.

Cushing's syndrome—disease caused by excessive hormone production by the outer layers of the adrenal gland. Signs include long hair, thin skin, fragile bones, stupor, weakness and sweating.

dermatitis—inflammation of the skin.

diabetes—any of several metabolic disorders characterized by excessive discharge of urine and persistent thirst.

dummy foal syndrome—condition of newborn foals, thought to be caused by cutoff of oxygen during birth, rendering the foal unable to nurse on his own. May be characterized by more than one stage, including barking foal and/or wandering foal syndromes.

EEE (eastern equine encephalomyelitis; sleeping sickness)—contagious brain and spinal cord inflammation in horses, caused by a specific viral strain transmitted by mosquitos. Characterized by fever, irrationality and/or stupor; almost always fatal.

endotoxemia (en-do-tok-SEEM-ee-ah)—presence of specific bacterial poisons (endotoxins) in the blood. May cause shock.

epiphysitis (eh-pih-fih-SY-tis)—inflammation and swelling of the epiphyseal plates (cartilage growth plates) above and below the joints. Associated with excessively rapid growth in young horses.

epistaxis (eh-pih-STAK-sis)—nosebleed.

equine infectious anemia (EIA; swamp fever)—infectious disease of horses transmitted by insects. Characterized in the acute or chronic stages by intermittent fever, depression, progressive weakness, weight loss, edema and anemia. In its inapparent form, horses show no sign of disease.

fistula—abnormal passage connecting an abscess or hollow organ to the body surface or connecting two hollow organs.

FPT(failure of passive transfer)—in newborn foals, reduced ability to fight infectious disease, resulting from failure to receive protective antibodies from the mare's colostrum.

gastroenteritis—inflammation of the stomach and the intestines.

goiter—enlarged thyroid gland in the neck, just behind the angle of the jaw.

granulomatous enteritis (gran-yoo-LO-ma-tus en-ter-EYE-tis)—inflammation of the intestines resulting in thickening of the intestinal wall with fibrous tissue, dead tissue and large infection-fighting cells. Follows heavy and recurrent parasite infection.

granulosa cell tumor—tumor of the cells lining a developing follicle in the ovary. Displaces surrounding ovarian tissues and may produce sex hormones which cause abnormal personality change.

gravel—condition in which infection has worked up into the white line of the hoof from the ground surface.

heaves—forced expiratory effort in horses due to narrowing of the small airways in the lungs.

hematoma—abnormal collection of blood in body tissues due to blood vessel injury.

hypothyroidism—condition caused by low output of the hormone thyroxin from the thyroid gland.

hypovolemia (hy-po-vo-LEE-mee-ah)—abnormal decrease in the body's total blood volume due to bleeding, dehydration or shock.

iridocyclitis (EAR-id-o-sy-KLY-tis) (moon blindness, ophthalmia, uveitis)—painful allergic response of the iris (the pigmented structure of the eye which surrounds the pupil) and its supporting tissues to a variety of substances including bacteria and parasites. Causes inflammation and muscle spasms.

ischemia (iss-KEE-mee-ah)—localized tissue anemia in a body part, due to blockage of the blood supply.

jaundice (icterus)—yellowish discoloration of the mucous membranes and/or skin, signaling liver or blood disorders.

joint ill (infectious arthritis)—inflammation of a joint due to the presence of bacteria or related infective agents.

keratitis (kare-uh-TY-tis)—inflammation of the cornea, the transparent "window" at the front of the eye.

lactic acidosis—condition resulting from excess lactic acid circulating in the bloodstream. A common result of overexertion and the source of stiffness following exercise.

lipoma (ly-PO-mah)—benign tumor of fat tissue.

lordosis—excessive "swayback" curvature of the spine.

lymphangitis (lim-fan-JY-tis) ("Monday morning leg")—bacterial infection of lymph nodes and vessels, characterized by hot, very painful swelling in and beneath the skin, usually on the legs.

lymphosarcoma (lim-fo-sar-KO-ma)—malignant cancer of the lymphoid tissue, which produces the white cells responsible for the body's immunity to diseases.

mastitis (mas-TY-tis)—inflammation of the udder.

melanoma (mel-ah-NO-mah)—tumor of pigment-producing cells in the skin. In its benign form, it appears as solitary or multiple nodules near body openings. Malignant melanomas are more deeply placed. Freshly raw or cut surface is characteristically jet black.

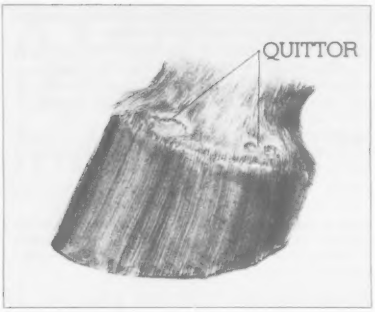
meningitis (men-en-JITE-is)—inflammation of the membranes (meninges) surrounding the brain or spinal cord, or both. May be caused by viral, bacterial or protozoal infection. Initial signs include fever, lethargy or agitation and disorientation.

myelitis (my-e-LITE-is)—spinal cord inflammation due to pressure exerted by a malformed or injured spine, protozoal invasion or spinal degeneration of unknown cause. Results in incoordination and may appear first as lameness.

navel ill—infection which enters the newborn foal through the umbilical vein. May manifest itself in the form of joint ill, an erosion of joint surfaces.

neonatal isoerythrolysis (I-so-er-ith-ROL-ih-sis)—anemic condition of newborn foals, caused by incompatibility between the blood types of dam and foal. Results in the production of antibodies by the dam which were transmitted to the foal through her

GRAVEL OR SEEDY TOE

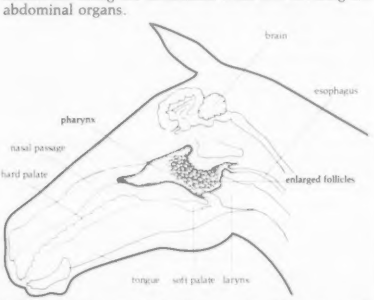


colostrum. These antibodies destroy some or all of the foal's oxygen-carrying red blood cells.

osteochondritis (os-te-o-kon-DRY-tis) (osteochondrosis, epiphysitis, subchondral cyst)—disturbance in the conversion of cartilage to bone in the growth plates and/or joint surfaces of the long leg bones of young, rapidly growing animals.

periostitis (pair-ee-os-TY-tis)—inflammation of the periosteum, the fibrous membrane covering bones.

peritonitis (pair-ih-to-NY-tis)—inflammation of the membrane lining the abdominal walls and covering the abdominal organs.



Follicular pharyngitis is characterized by enlarged bumps (follicles) in the tonsil-like tissue lining the pharynx.

pharyngitis (fare-in-JY-tis)—inflammation of the pharynx, the chamber behind the nasal passages and in front of the larynx (voice box).

photosensitivity—an excessive reaction of unpigmented areas of the skin to sunlight, resulting in inflammation. May be provoked by allergy, drugs or liver disease.

piroplasmosis (PY-ro-plaz-MO-sis) (babesiosis; equine biliary fever; equine malaria; horse tick fever)—contagious blood disease of horses, usually transmitted by ticks. Signs include fever, listlessness and loss of appetite.

pleurisy (PLER-ih-see)—inflammation of the membrane lining the chest (thorax) and covering the lungs. Accompanied by fever, painful and difficult breathing and fluid in the chest cavity.

pulmonary emphysema (em-fa-SEE-mah)—abnormal amount of air in lung tissues, associated with stretching and destruction of the tiny air sacs (alveoli) in the lungs. Rare in horses; often confused with asthma (heaves).

purpura hemorrhagica (PER-per-ah hem-or-AD-jih-kah)—acute, noncontagious disease of horses and humans, characterized by edema, muscle soreness and inflammation of skin and mucous membranes. Thought to be an allergic-hypersensitivity reaction to bacterial antigens circulating in the bloodstream.

quittor—pus-forming inflammation of the outer cartilages of the horse's foot.

rhinopneumonitis (RY-no-noo-mo-NY-tis)—contagious disease caused by a virus of the *Herpes* group, characterized by fever, mild upper respiratory infection and, in mares, abortion. May trigger an "abortion storm" in broodmare bands.

saddle acne (furunculosis)—skin disease characterized by highly sensitive pus-filled bumps in the saddle area. Results from repeated grinding of dirt into the pores.

scours—watery diarrhea.

seedy toe—condition of horse's foot in which the hoof wall separates from the sensitive tissue underneath and nearby hoof horn becomes brittle and dry.

septicemia (sep-ti-SEEM-ee-ah)—bacterial infection circulating throughout the bloodstream. Often fatal because the infection is distributed to almost every organ.

sesamoiditis (ses-ah-moy-DY-tis)—inflammation of the sesamoid bone.

shaker foal syndrome—often fatal, progressive weakness of the young foal which has recently been ascribed to botulism infection of the intestines.

sinusitis (sy-nuh-SY-tis)—inflammation of one or more of the cavities surrounding the nasal passages.

sitfast—area of chronic inflammation on the back, caused by harness or saddle pressure and characterized by progressive thickening, deterioration and infection of the skin.

squamous cell carcinoma—lumpy, irregular cancer of the superficial cells of the skin near body openings.

strangles—highly contagious bacterial infection of the lymph nodes, usually of the head, caused by *Streptococcus equi*. The abscesses may become so large as to obstruct the airway (hence the term "strangles") and may break internally, draining a creamy discharge through the nose.

sweeny—wasting away of shoulder muscles due to damaged nerve supply.

tendinitis—tendon inflammation due to strain or injury causing tenderness and lameness.

tetanus—rigid paralytic disease which results in lockjaw and muscle spasms. Caused by wound infection with *Clostridium tetani*, an anaerobic bacterium that lives in soil and feces.

thromboembolic colic (THROM-bo-em-BOL-ik)—abdominal pain caused by obstruction in a blood vessel which blocks blood supply to part of the intestines.

thumps (synchronous diaphragmatic flutter; SDF)—spasmodic contraction of the diaphragm in time to the heartbeat, resembling hiccoughs. Sometimes accompanied by rhythmic twitching of flank muscles. Usually occurs as a result of stress and fatigue in endurance horses; severe loss of electrolytes (especially calcium) is a probable cause.

toxemia—presence of toxins, or poisonous substances, in the bloodstream.

white muscle disease—muscle damage resulting from a selenium deficiency in the diet.

wobbles (ataxia)—group of diseases of the spinal column and spinal cord, characterized by various defects of coordination; describes the wandering or staggering gait of affected horses.

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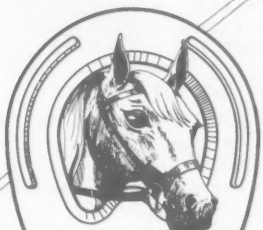

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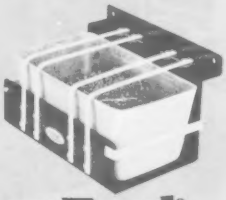

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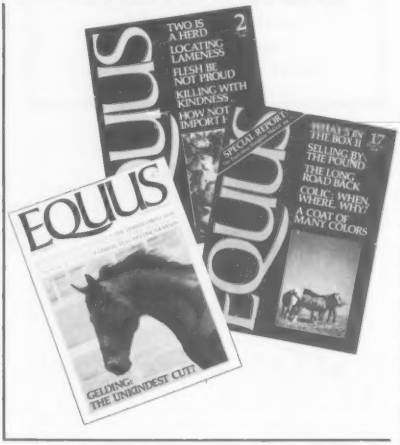

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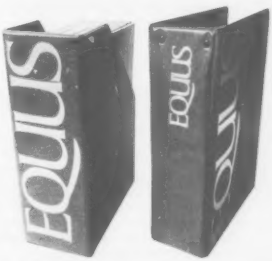

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RED ALERT!

The horse owner is often capable of taking on much of the responsibility for treating injuries to his horse. Some will want to, and some won't—and the decision on whether to call the veterinarian will depend largely on each individual's level of experience and know-how in first aid treatment.

There are certain crises, however, which are more than the average horseman can handle. These are designated by EQUUS as **Red Alerts**—situations in which something is seriously wrong, and a veterinarian's attention is urgently needed.

Vital Signs Monitor

	Normal	Red Alert
Temperature	99-101 degrees Fahrenheit; may be slightly higher in hot weather	higher than 101 degrees Fahrenheit; cold and/or patchy sweating
Pulse	36-48 beats per minute, taken outside of the hind leg below the hock, on the foreleg over the sesamoid bones, on the lower jaw or using the central artery of the ear	greater than 60 in a resting horse; weak; irregular
Capillary Refill	1 to 2 seconds to recolor a pressure-blanched spot on the gums, which—along with the mucous membranes and nostrils—are pink	refill time greater than 3 seconds; dark red, brown, yellow or blue gums or nostrils
Respiration	8 to 16 breaths per minute depending on activity level; sweet-smelling breath passes equally through each nostril	unusual flare of nostrils; foam or chewed food in nostrils; short breaths ending in grunts; quick, shallow breaths in resting horse; exaggerated rib movements with each breath
Intestinal Sounds	a symphony of gurgles, squeaks, rasps, pipings and scrapings coming from the stomach area behind the ribs and in front of the stifle	no gut sounds

Observation Analysis

	Normal	Red Alert
Posture	standing squarely on four legs or balancing on three with the fourth in easy resting position	straddle-legged sawhorse stance; disabled leg; contorted position
Facial Expression/ Attitude	relaxed, alert	sunken dyes; sardonic grin; lowered head; drooping ears; too bright or too dull eyes
Mobility	coordinated, surefooted; test soundness by jogging the horse straight and in 20- to 30-foot-diameter circles in both directions on pavement or other hard surface; flex leg joints to detect tenderness, stiffness	falling; unsteadiness of gait

For more on evaluating your horse's health, see EQUUS 28, "The Picture of Health."

Colic Alert

Colic is a Red Alert when the horse:

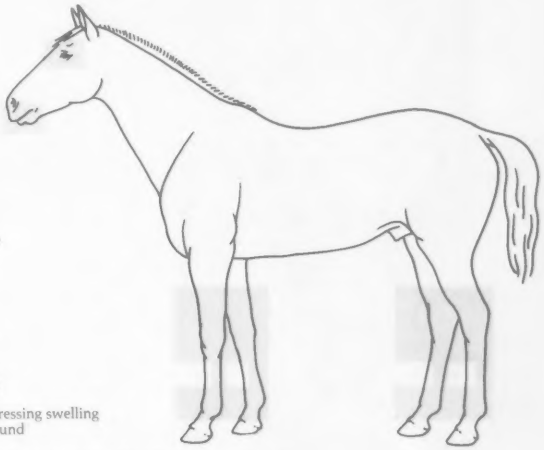
- is rolling and thrashing
- has no intestinal sounds
- is in shock (determined by checking vital signs)
- assumes a sawhorse stance with expression of suffering

• is sweating profusely.

These signs are characteristic of the most severe form of colic; less intense signs may indicate an early stage of what could develop into a life-threatening illness. Notify your veterinarian of any signs of colic as soon as they appear, and call again in 20 minutes after seeing how the situation progresses.

For more on what to do when your horse has colic, see EQUUS 51, "Colic: What You Can Do Before The Vet Arrives" and check the index under "Colic."

Wound Alert



Red Alert wounds include:

- any complete penetration of the skin on or near the eye
- any injury to the jaw causing bleeding in the mouth
- any injury to the joints or tendon sheaths of the leg which squirt joint fluid when the horse moves.

Wounds are also Red Alerts when:

- there is uncontrollable bleeding
- the affected part is disabled
- there is massive or rapidly progressing swelling
- there is no feeling below the wound
- the horse is in shock
- the horse is behaving violently yet is not trapped or entangled
- you have reason to believe that a foreign material (such as wood or bedding) is stuck or buried in the wound, but you cannot see or remove the offending substance.

For complete details on treating wounds, see EQUUS 1, "Taking The Mystery Out Of Wound Care" and check the index under "Wounds."

The First Aid Kit

Set up a complete first aid kit before you're faced with an emergency situation so you won't have to waste precious time after the injury occurs. Store all necessary equipment in one handy box reserved for first aid use only.

Here's what you should have on hand to treat a wound:

Injections

- sterile disposable hypodermic syringes & needles
- antibiotic
- tranquilizer
- tetanus toxoid or antitoxin

Cleaning Solutions

- several pint bottles of sterile saline (salt) solution (from veterinarian or drugstore)
- antibacterial such as liquid Furacin (nitrofurazone) to add to saline solution—one tablespoon per pint
- surgical soap (from veterinarian or drugstore)
- a clean plastic or stainless steel bucket or saucepan
- 4" x 4" sterile gauze pads (from veterinarian or drugstore)
- soft nail brush or complexion brush to give a mild scrubbing action
- natural sponge for cleaning skin (avoid using cotton because it doesn't pick up dirt, and paper towels because they disintegrate)

Instruments

- surgical scissors for trimming hair
- surgical forceps for removing foreign objects

Dressing

- water soluble antibacterial ointment such as Furacin
- sterile nonstick surface covering such as Telfa or Adaptic
- sterile stretch gauze rolls
- tincture of benzoin spray such as Tapeeze
- clean leg cottons or composite bandage
- adhesive elastic bandage
- nonstick elastic bandage
- flannel bandage
- electrician's tape

HORSE FEEDER'S ALMANAC

The Essential Six

Water, energy, protein, salt, calcium and phosphorus are the basic nutritional requirements of all horses. Relying on diets of grass and hay, most horses can meet these needs, which remain relatively constant no matter the level of activity.

Calcium And Phosphorus

The phosphorus content of a horse's diet should not exceed the calcium content. The ratio between calcium and phosphorus can vary from 6:1 to 1:1, as long as the necessary minimum amount of each is present. Legumes are high in calcium; grass hay and grain are low.

Energy

The amount of energy a horse requires is determined by his level of activity; a hard-working horse may require up to twice as much as an idle one. You can gauge energy needs by eye. Give your horse plentiful good roughage and an appropriate amount of energy-dense grain to keep just enough fat covering his ribs so that you can see them when he takes a breath.

Grain should never make up more than half of the ration by weight. The highest-calorie grain is corn. Barley and oats run second and third. The calorie content of commercial sweetfeed mixes varies, but they usually contain fewer calories per pound than barley, oats and corn.

The Growing Horse

Be wary of feeding too much grain. Although energy-dense diets are often fed to promote maximum early growth in young horses, they have their dangers. Energy-dense rations make the youngster more sensitive to imbalances in his diet, particularly the calcium-phosphorus ratio, and may lead to energy excess resulting in bone malformation.

Calcium and phosphorus requirements for growing horses are greater than for mature horses and cannot be met by most roughages and grains. Young horses' rations must be supplemented with minerals. Additionally, young horses can't tolerate as wide a calcium-phosphorus ratio as mature horses. It must be between 3:1 and 1:1.

The Working Horse

For a horse doing a full day's work (hunting or endurance riding, for example) withhold grain four hours prior to the beginning of the event. Feed only a moderate quantity of hay the night before. Allow snacks of grass or hay during the day.

In General . . .

Give the horse free access to water and trace-mineralized salt in block or loose form. The mature horse needs to eat between 1½ and 1¾ pounds of dry matter a day for every 100 pounds of body weight. Because horses regulate their intake more by the weight of their food than by its energy content, it is up to you to ensure that rations contain the proper proportion of energy.

Any change in the amount or type of feed should be made gradually. Follow your feeding schedule rigidly, and feed a uniform ration from meal to meal. The average horse can do well with two feedings per day. Optimal feeding order: water, hay, grain.

Approximate Weight-Volume Conversion For Grain

corn: 1 qt weighs 1.8 lb
barley: 1 qt weighs 1.5 lb
oats: 1 qt weighs 1 lb
sweetfeed mixes: 1 qt generally weighs 1 lb

Need help determining the content of your horse's daily fare? See EQUUS 26, "When Horses Go To Dinner"; EQUUS 27, "The Art Of Menu Mixing"; EQUUS 49, "Fueling Up" and check the index under "Nutrition."

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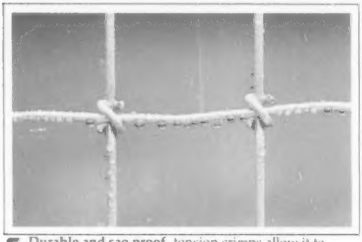

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